

Attention: Medicaid Physicians, Pharmacies, FQHC, RHC, and Nursing Homes

Due to the January 1, 2006 implementation of Medicare's Part D coverage of prescription drugs, Alabama Medicaid will be postponing the quarterly updates to our Preferred Drug List (PDL) and Prior Authorization (PA) process until February in an effort to ease the burden on our providers.

Effective February 1, 2006, the Alabama Medicaid Agency will require prior authorization (PA) for payment of non-preferred brands in the following drug classes:

Eye/Ear/Nose/Throat Preparations: Antiallergic Agents Eye/Ear/Nose/Throat Preparations: Vasoconstrictors

Macrolide Antiinfectives

Effective February 1, 2006, the Alabama Medicaid Agency will require prior authorization (PA) for payment of generic omeprazole. Preferred brands as well as OTC versions of Proton Pump Inhibitors will continue to be available with no PA necessary.

Effective February 1, 2006, the Alabama Medicaid Agency will update our Preferred Drug List (PDL):

February 1, 2006 PDL Additions		February 1, 2006 PDL Deletions
Concerta®	Optivar®	Nardil®
Diastat®	Patanol®	Norpramin®
E.E.S. ®	PCE®	Pamelor®
Elestat®	Sular® (January 1, 2006 addition)	Parnate®
Eryc®	Tyzine®	Vivactil®
Eryped®	Zaditor®	
Livostin®	Zithromax®	
Lunesta®	Zmax®	

The PA request form can be found on the Agency website at *www.medicaid.state.al.us*, and should be utilized by the prescribing physician or the dispensing pharmacy when requesting a PA. PA requests may be faxed or mailed to:

Health Information Designs (HID) Medicaid Pharmacy Administrative Services P. O. Box 3210

Auburn, AL 36832-3210 Fax: 1-800-748-0116 Phone: 1-800-748-0130

Incomplete PA requests or those failing to meet Medicaid criteria will be denied. If the prescribing physician believes medical justification should be considered, the physician must document this on the form or submit a written letter of medical justification along with the prior authorization form. Additional information may be requested. Staff physicians will review this information.

Policy questions concerning this provider notice should be directed to the Pharmacy Program at (334) 242-5050. Questions regarding prior authorization procedures should be directed to the HID help desk at 1-800-748-0130.